

Bureau of Health Care Quality and Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: NVN4848ASC	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 02/09/2010
NAME OF PROVIDER OR SUPPLIER EYE SURGERY CENTER OF NORTHERN NEVA		STREET ADDRESS, CITY, STATE, ZIP CODE 5420 KIETZKE LANE, STE 106 RENO, NV 89511		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
A 00	INITIAL COMMENTS This Statement of Deficiencies was generated as a result of a State Licensure focused survey conducted in your facility on 2/9/10 and finalized on 2/9/10, in accordance with Nevada Administrative Code, Chapter 449, Surgical Centers for Ambulatory Patients. The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state or local laws.	A 00	<i>Accepted 2/22/10 Cynthia Paul, RN</i>	
A166 SS=E	NAC 449.9905 Pharmacist Required 4. In the absence of a full-time pharmacist, the director of nursing must be designated in writing as responsible for the control of dangerous drugs and controlled substances. Substances listed as schedule II controlled substances pursuant to chapter 453 of NRS must be stored in a storage area with two locks. If a box is used, it must be securely fastened and immovable. This Regulation is not met as evidenced by: Based on interview, policy review and observation the facility failed to keep controlled substances secured in a locked storage area in the facility's procedure room. Severity: 2 Scope: 2	A166	Plan of Correction: see following pages.	

If deficiencies are cited, an approved plan of correction must be returned within 10 days after receipt of this statement of deficiencies

Nancy Paul, RN, MSN
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE *Clinical* (X6) DATE *2/19/10*
RECEIVED

STATE FORM

6899

YQOC11

If continuation sheet 1 of 1

FEB 22 2010

BUREAU OF LICENSURE AND CERTIFICATION
LAS VEGAS, NEVADA

Eye Surgery Center of Northern Nevada
5420 Kietzke Lane, Suite 106
Reno, NV 89555
775-851-2444

**PLAN OF CORRECTION
SURVEY DATE 2/9/2010**

ID Prefix Tag: A166 NAC 449.9905 Pharmacist Required

This regulation is not met as evidenced by: Based on interview, policy review and observation the facility failed to keep controlled substances secured in a locked storage area in the facility's procedure room.

Providers Plan of Correction:

Controlled substances are locked in a double locking drug box located inside the cabinet in the pharmacy. The Clinical Director, or other designated Registered Nurse or physician, will carry the controlled substance key. This has been an ongoing practice. The above deficiency states that the controlled substances were not secured in a locked storage area in the facility's procedure room.

Immediate correction was made on 2/9/2010 upon notification by the State Surveyor: The anesthesiologist was given a key to the anesthesia craftsman by the Clinical Director, and he was instructed that the controlled substances in the operating room be locked in the anesthesia craftsman when the RN and physician are not in the operating room, i.e. when a patient is taken to the recovery room by the RN and physician the medication was in the anesthesia cart drawer and the cart was locked. Upon return to the room with the next patient the cart is unlocked. Each time the RN and physician leave the room the cart will be locked.

Ongoing Plan of Correction:

Policy numbers 15-1 and 15-5 were updated as follows:

The Clinical Director, or Registered Nurse designee, will unlock the anesthesia craftsman, in the operating room, at the start of the day and sign out controlled substances directly to the anesthesiologist upon their arrival. At this time the anesthesia craftsman key will be given to the anesthesiologist for use during the day.

During procedures when controlled substances are being used, they will be locked in the anesthesia craftsman when the Registered Nurse and/or anesthesiologist is out of the room.

RECEIVED
FEB 22 2010
BUREAU OF LICENSURE AND CERTIFICATION
LAS VEGAS, NEVADA

Measures to ensure that the deficient practice will not recur: Policy 15-1 and 15-5 will be posted and read and initialed by all staff members. Each anesthesiologist who comes to the facility will be informed of the procedure by the Clinical Director. The circulating RN in the OR will ensure compliance. The Clinical Director will be informed if there are any issues.

While locking the controlled substances in the craftsman occurred upon notification by the State surveyors on 2/9/2010, the policy updates and education of the staff will occur beginning Monday 2/22/2010. Full compliance with policy and procedure change is required as of 2/22/2010. The corrective action is being monitored by the OR RN in the room and ultimately by the Clinical Director in making daily spot checks, communication with the OR RN, and communication with the physicians.

Updated Policy 15-1 and 15-5 included.

RECEIVED
FEB 22 2010
BUREAU OF LICENSURE AND CERTIFICATION
LAS VEGAS, NEVADA

RECEIVED

FEB 22 2010

Policy and Procedure
Subject: PHARMACY OPERATIONS
Review: Annually
Date of Revision: 02/27/09
02/19/10

Section 15-1

BUREAU OF LICENSURE AND CERTIFICATION
LAS VEGAS, NEVADA

Effective Date: 07/01/07

Pharmacy Operations. The ASC pharmacy operations are directed and supervised by a licensed pharmacist under contract as a Consultant Pharmacist. The pharmacy is administered in accordance with accepted professional principles. Pharmacy supervision is defined as follows:

1. The Director of Pharmacy is responsible to the Governing Body of the ASC and Board of Pharmacy for supervising, and coordinating all activities of the Pharmacy in conjunction with the Medical Director and Clinical Director.
2. All licensed pharmacists who provide pharmaceutical services as defined by the Pharmacy Practice Act shall practice under policies, procedures, and protocols approved by the Director of Pharmacy. These policies, procedures, and protocols shall be subject to review and approval by the Board of Pharmacy.

PROCEDURE:

1. The Consultant Pharmacist has the responsibility of evaluating the processes of control of all medications in the ASC.
2. The physician is responsible for writing/giving medication orders. Drugs will be administered to patients only upon written, verbal, or telephone order of a physician. Drugs will be handled in a safe and secure manner. Verbal and telephone orders must be co-signed by the physician.
3. All Schedule II drugs in the Center will be verified by a running count at the end of every operational day by two licensed personnel and documented in an appropriate log.
4. A controlled substance record will be maintained and will list the following information on a separate sheet for each type and strength of controlled substance: date, time administered, name of patient, dose, prescriber's name, signature of person administering the dose, and the remaining drug balance.
5. A running total in-house record will be maintained and will include the date and time of each check of a schedule drug substance supply, the balance on hand, names of patients receiving such drugs, physician's

RECEIVED

FEB 22 2010

STATE OF NEVADA
DIVISION OF PROFESSIONAL REGULATION
LAS VEGAS, NEVADA

name, quantity of medications used, and the signatures of the licensed personnel performing the check.

6. When breakage or wastage of a controlled substance occurs, the amount given and the amount wasted shall be recorded by the licensed person who wasted the medication and verified by the signature of a licensed person who witnessed the wastage. In addition to the above referenced licensed personnel, licensed Pharmacists shall be allowed to witness wastage of controlled substances. When a licensed person is not available to witness wastage, the partial dose shall be sent to the Nevada Department of Health, Pharmacy Services and Drug Control for Destruction.
7. Eye Surgery Center of Northern Nevada will not dispense drugs or biologicals.
8. The CRNA, RN, or physician will give all IV medications.
9. All controlled substances will be locked in a double locking drug box located inside the cabinet in the pharmacy. The Clinical Director, or other designated Registered Nurse or physician, will carry the controlled substance key.
10. The Clinical Director, or Registered Nurse designee, will unlock the anesthesia craftsman, in the operating room, at the start of the day and sign out controlled substances directly to the anesthesiologist upon their arrival. At this time the anesthesia craftsman key will be given to the anesthesiologist for use during the day.
11. During procedures when controlled substances are being used, they will be locked in the anesthesia craftsman when the Registered Nurse and/or anesthesiologist is out of the room.
12. All medications will be stored in original containers with original labels. If medications are drawn up ahead of time, they must be clearly marked with name of drug, date, and nurse's initials.
 - A. A sterile, single use disposable needle and syringe will be used for each injection and discarded in a sharps container after use.
 - B. Vials labeled as single use will be used for one patient only.
 - C. When using multiple-dose vials, a sterile, single use disposable needle and syringe will be used each time the vial is entered.
 - D. Aseptic technique will be used.
 - E. Multi-use medications will be dated when opened and will be discarded at 28 days unless expiration date on vial is sooner.

EYE SURGERY CENTER OF NORTHERN NEVADA

Policy and Procedure

Section 15-5

Subject: MAINTENANCE OF STOCK DRUG SUPPLY

Review: Annually

Effective Date: 07/01/07

Date of Revision: 02/28/09

02/19/10

1. The Clinical Director is responsible for pharmaceutical services and ensuring stock is at an adequate level to insure the safety of the patients. The Clinical Director is responsible for tracking daily usage and assisting in inventory of the drug supply.
2. A stocking list shall be maintained and upgraded as necessary to be used as an inventory checklist and to insure that appropriate inventory levels of drugs are available for use.
3. All controlled substances will be kept under double lock and key and will be the responsibility of the Clinical Director or his/her designated replacement.
4. The Clinical Director, or Registered Nurse designee, will unlock the anesthesia craftsman, in the operating room, at the start of the day and sign out controlled substances directly to the anesthesiologist upon their arrival. At this time the anesthesia craftsman key will be given to the anesthesiologist for use during the day.
5. During procedures when controlled substances are being used, they will be locked in the anesthesia craftsman when the Registered Nurse and/or anesthesiologist is out of the room.
6. A medication log will be kept documenting controlled substances used. At the closing of the ASC every operational day, a controlled substance running count will be performed by two (2) licensed health professionals and documented in the substance logbook.
7. When breakage or wastage of a controlled substance occurs, the amount given and the amount wasted shall be recorded by the licensed person who wasted the medication and verified by the signature of a licensed person who witnessed the wastage. In addition to the above referenced licensed personnel, licensed Pharmacists shall be permitted to witness wastage.
8. All legend medications will be stored in locked cabinet or storage area with limited access.

RECEIVED
FEB 22 2010
BUREAU OF LICENSURE AND CERTIFICATION
LAS VEGAS, NEVADA